

Your Benefits Connection

2015-2016

FOR COMMONWEALTH OF MASSACHUSETTS

MEDICARE

RETIREES AND SURVIVORS

Benefits Effective July 1, 2015



GIC HEALTH PLANS
BENEFITS AT-A-GLANCE

MEDICARE AND YOUR GIC BENEFITS

Medicare is a federal health insurance program for retirees age 65 or older and certain disabled people. Medicare Part A covers inpatient hospital care, some skilled nursing facility care and hospice care. Medicare Part B covers physician care, diagnostic x-rays and lab tests, and durable medical equipment. Medicare Part D is a federal prescription drug program.

When you or your spouse is age 65 or over, or if you or your spouse is disabled, visit Social Security's website or your local Social Security Administration office to find out if you are eligible for free Medicare Part A coverage.

If you (the insured) continue working after age 65, you and/or your spouse should NOT enroll in Medicare Part B until you (the insured) retire.



When you (the insured) retire:

- If you and/or your spouse is eligible for free Part A coverage, state law requires that you and/or your spouse enroll in Medicare Part A and Part B in order to be covered by the GIC.
- You must join a Medicare plan sponsored by the GIC to continue health coverage. These plans provide comprehensive coverage for some services that Medicare does not cover. If both you and your spouse are Medicare eligible, both of you must enroll in the same Medicare plan.
- You must continue to pay your Medicare Part B
 premium. Failure to pay this premium will result in the
 loss of your GIC coverage.

Retiree and Spouse Coverage if Under and Over Age 65

If you (the retiree), your spouse or other covered dependent is younger than age 65, the person or people under age 65 will continue to be covered under a Non-Medicare plan until you and/or he/she becomes eligible for Medicare.

If this is the case, you must enroll in one of the pairs of plans listed below:

Health Plan Combination Choices – *State retirees*, *municipal retirees*, deferred retirees and former employees receiving continuation coverage

NON-MEDICARE PLAN	MEDICARE PLAN
Fallon Health Direct Care	Fallon Senior Plan
Fallon Health Select Care	Fallon Senior Plan
Harvard Pilgrim Independence Plan	Harvard Pilgrim Medicare Enhance
Harvard Pilgrim Primary Choice Plan	Harvard Pilgrim Medicare Enhance
Health New England	Health New England MedPlus
Tufts Health Plan Navigator	Tufts Health Plan Medicare Complement
Tufts Health Plan Navigator	Tufts Health Plan Medicare Preferred
Tufts Health Plan Spirit	Tufts Health Plan Medicare Complement
Tufts Health Plan Spirit	Tufts Health Plan Medicare Preferred
UniCare State Indemnity Plan/Basic	UniCare State Indemnity Plan/ Medicare Extension (OME)
UniCare State Indemnity Plan/Community Choice	UniCare State Indemnity Plan/ Medicare Extension (OME)
UniCare State Indemnity Plan/PLUS	UniCare State Indemnity Plan/ Medicare Extension (OME)

Health Plan Combination Choices – *GIC Retired Municipal Teachers* (RMTs who do not participate in the municipal health-only program) and *Elderly Governmental Retirees* (EGRs)

NON-MEDICARE PLAN	MEDICARE PLAN
Fallon Health Direct Care	Fallon Senior Plan
Fallon Health Select Care	Fallon Senior Plan
Health New England	Health New England MedPlus
UniCare State Indemnity Plan/Basic	UniCare State Indemnity Plan/ Medicare Extension (OME)

MEDICARE RATE CALCULATIONS, REMINDERS AND PLAN DESIGN

How to Calculate Your Rate

See Separate Rate Chart

Retiree and Spouse Both on Medicare

Find the "Retiree Pays Monthly" rate for the Medicare plan in which you are enrolling and double it for your total monthly rate.

Retiree and Spouse Coverage if Under and Over Age 65

- 1. Find the "Retiree Pays Monthly" premium for the Medicare Plan in which the Medicare retiree or spouse will be enrolling.
- 2. Find the "Retiree Pays Monthly" individual coverage premium for the Non-Medicare Plan in which the Non-Medicare retiree or spouse will be enrolling.
- **3.** Add the two premiums together; this is the total that you will pay monthly.

Helpful Reminders

- Visit Social Security's website or your local Social Security office for more information about Medicare benefits.
- HMO Medicare plans require you to live in their service area. See the *Medicare Health Plan Locator Map*.
- You may change GIC Medicare plans only during annual enrollment, unless you have a qualifying event such as moving out of your plan's service area. Note: Even if your doctor or hospital drops out of your Medicare HMO, you must stay in the HMO until the next annual enrollment. Your Medicare HMO will help you find another provider.

- Most enrollees should not enroll in an individual federal Medicare drug plan.
- Benefits and rates of Fallon Senior Plan and Tufts Health Plan Medicare Preferred are subject to federal approval and may change January 1, 2016; you cannot change plans until the spring Annual Enrollment period. These plans, and the UniCare State Indemnity Plan/Medicare Extension (OME) Plan effective January 1, 2016, automatically include Medicare Part D prescription drug benefits.

Mark the Date!

Annual Enrollment changes are due Wednesday, May 6 for changes effective July 1, 2015

- Current members: Retiree/Survivor Enrollment/
 Change form (available on our website and at the health fairs)
 or written request to make a health plan change to the GIC.
- Retirees and survivors of collaboratives and municipalities joining the GIC: Send completed forms, along with required documentation, to the GIC Coordinator in your benefits office.

For more information about specific plan benefits, contact the plan.

HEALTH INSURANCE			
Fallon Health Senior Plan	1.866.344.4442	www.fallonhealth.org/gic	
Health New England MedPlus	1.800.842.4464	www.hne.com/gic	
Tufts Health Plan Medicare Complement Medicare Preferred	1.888.333.0880	www.tuftshealthplan.com/gic	
UniCare State Indemnity Plan/ Medicare Extension (OME)	1.800.442.9300	www.unicarestateplan.com	
 Prescription Drugs (CVS/caremark) 	1.877.876.7214	www.caremark.com/gic	
 Mental Health/Substance Abuse and EAP (Beacon Health Options) 	1.855.750.8980	www.beaconhs.com/gic	

BENEFITS AT-A-GLANCE: Medicare Health Plan Copays and Deductibles

This chart is an overview of the plan benefits. It is not a complete description. Benefits are subject to certain definitions, conditions, limitations and exclusions as spelled out in the respective plan documents. With the exception of emergency care, there are no out-of-network benefits for the GIC's Medicare HMOs.

HEALTH PLAN	FALLON SENIOR PLAN	HARVARD PILGRIM	HEALTH NEW ENGLAND
IICACIIIT CAN	PALLON SENION PEAN	MEDICARE ENHANCE	MEDPLUS
PLAN TYPE	HMO	INDEMNITY	НМО
PCP Designation Required	Yes	No	Yes
PCP Referral to Specialist Required	Yes	No	No
Calendar Year Deductible	None	None	None
Preventive Care Office visits according to health plan's schedule	No copay	No copay	No copay
Physician Office Visit (except mental health)	\$10 per visit	\$10 per visit	\$10 per visit
Retail Clinic	\$10 per visit	\$10 per visit	\$10 per visit
Outpatient Mental Health and Substance Abuse Care	\$10 per visit	\$10 per visit	\$10 per visit
Inpatient Hospital Care	No copay	No copay	No copay
Hospice Care	No copay	No copay	No copay
Diagnostic Laboratory Tests and X-rays	No copay	No copay	No copay
Surgery Inpatient & Outpatient	No copay	No copay	No copay
Emergency Room Care (includes out-of-area)	\$50 per visit (waived if admitted)	\$50 per visit (waived if admitted)	\$50 per visit (waived if admitted)
Hearing Aids	First \$500 covered at 100%; 80% coverage for the next \$1,500 per person, per two-year period		
Prescription Drug Retail: up to 30-day supply			
Tier 1 Tier 2	\$10 \$30	\$10 \$30	\$10 \$30
Tier 3	\$65	\$30 \$65	\$65
Mail order: Maintenance drugs			
up to a 90-day supply	÷>=	1	
Tier 1 Tier 2	\$25 \$75	\$25 \$75	\$25 \$75
Tier 3	\$75 \$165	\$75 \$165	\$165

The amounts and terms that appear in bold in this chart are benefits that have changed effective July 1, 2015.

Benefits and rates of Fallon Senior Plan and Tufts Health Plan Medicare Preferred are subject to federal approval and may change effective January 1, 2016. Prescription drug copays for these plans will increase to the copays listed effective January 1, 2016.

TUFTS HEALTH PLAN MEDICARE COMPLEMENT	TUFTS HEALTH PLAN MEDICARE PREFERRED	UNICARE STATE INDEMNITY PLAN MEDICARE EXTENSION (OME) with CIC (Comprehensive) Without CIC, deductibles are higher and coverage is only 80% for some services. Contact the plan for details.
HM0	HMO	INDEMNITY
Yes	Yes	No
Yes	Yes	No
None	None	\$35 per person
No copay	No copay	No copay
\$10 per visit	\$10 per visit	No copay
\$10 per visit	\$10 per visit	No copay
\$10 per visit	\$10 per visit	First 4 visits: no copay; visits 5 and over: \$10 per visit
No copay	No copay	\$50 per admission (maximum one copay per person per calendar year quarter)
No copay	No copay	No copay
No copay	No copay	No copay
No copay	No copay	No copay in MA and for out-of-state providers who accept Medicare; call the plan for details if using out-of-state providers who do not accept Medicare
\$50 per visit	\$50 per visit	\$25 per visit
(waived if admitted)	(waived if admitted)	(waived if admitted)
First \$500 cove	ered at 100%; 80% coverage for the next \$1	I,500 per person, per two-year period
\$10	\$10	\$10
\$30	\$30	\$30
\$65	\$65	\$65
\$25	\$25	\$25
\$75	\$75	\$75
\$165	\$165	\$165

You may change plans <u>only</u> during the GIC's Spring Annual Enrollment period, even though the plan's providers may change on a calendar year basis.

ANNUAL ENROLLMENT: APRIL 8 – MAY 6, 2015

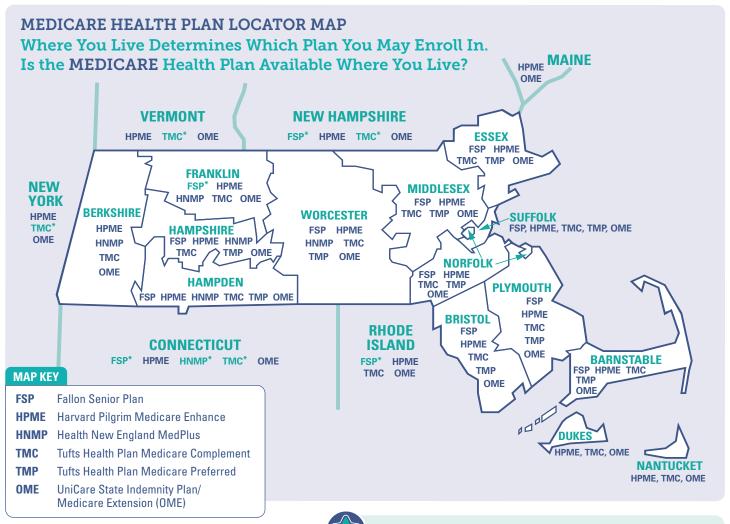
Do Your Homework During Annual Enrollment

- Determine if you are eligible for Medicare (see the *Medicare* and *Your GIC Benefits* section for more information).
- Where you live determines which plan(s) you may enroll in.
 See the locator map below to see which Medicare retiree/survivor health plans are available in your area.
- See your GIC Benefit Decision Guide for additional eligibility details, benefit information, rates, and factors to consider when choosing a health plan.

- Contact the health plans you are considering to find out:
 - Information on other health plan benefits that are not described in this brochure; and
 - Whether your doctors and hospitals are in the HMO network, if enrolling in an HMO plan.
- See the GIC's website (www.mass.gov/gic) for additional information.



Keep in mind that if your doctor or hospital leaves your Medicare HMO's network during the year, you *must* stay in the plan until the next annual enrollment. In the meantime, your health plan will help you find another provider.



The Harvard Pilgrim Medicare Enhance Plan is available throughout the United States. The UniCare State Indemnity Plan/Medicare Extension is available throughout the United States and outside of the country.

* Not every city and town is covered in this county or state; contact the plan to find out if you live in the service area. The plan also has a limited network in this county or state; contact the plan to find out which doctors and hospitals participate in the plan.



